

## Long-Term Care Task Force

### Briefing Paper

**Issue:** Creative Community-Based Strategies or Partnerships for Funding Quality Long Term Care

**Description:** Meeting the needs of individuals requiring long term supports and services requires a cross cutting approach that considers paid and unpaid long term support services, acute medical care, housing, transportation, and employment. In order to meet all of these needs, communities need to pursue creative strategies to combine funding sources and other resources. Sources of funding can combine several public funding sources or public and private sources.

**Background:** Partnerships can offer a different set of ideas, resources, and expertise to the table. Successful collaborations tend to share two characteristics: (1) the partners hold a set of shared values, and (2) the partnership produces clear benefits for both partners. The projects described below highlight the value of community partnerships to support individuals with disabilities, both young and old.

#### **Lapham Park Venture, Milwaukee, Wisconsin**

Lapham Park is a subsidized housing complex owned and operated by the Housing Authority of the City of Milwaukee. It was built in 1964 and has 200 units. The Lapham Park Venture began as a result of requests from residents for more and improved services. This housing-based project has two goals:

1. Improve housing stability and quality of life for residents through a creative public/private funding partnership, and
2. Promote aging in place by superimposing a Continuing Care Retirement Community model on a publicly-funded housing project.

Residents can access health-related and supportive services as a result of a purposeful collaboration between community services agencies and state programs. Services include for example, home health, prescription refills, dental, hospice, physical therapy, podiatry, and primary care, some of which is provided through an on-site clinic. Case management, nutrition and housekeeping services are provided. Recreational activities are also available.

Funding comes from a variety of sources which include Older American's Act funds, the U.S. Department of Housing and Urban Development, private foundations and donations, county government, Medicaid and Medicare. More information about the program can be found at <http://www.hud.gov/offices/pih/pihcc/laphampark.ppt>. General information about other innovative models in elderly public housing is available at [www.hud.gov/pih/innovativemodels.cfm](http://www.hud.gov/pih/innovativemodels.cfm).

#### **Able-Disabled Advocacy: Projects With Industry Program, San Diego County, California**

Able-Disabled Advocacy (A-DA), a non-profit organization, provides individuals with disabilities in San Diego County with job placement and occupational training. A-DA's services include

vocational testing and assessment, employment planning, workplace skills training, supervised job search and placement, computer training, assistive technology training, links with community partners, and employment follow up.

The goal of all PWI partners is to have adults with disabilities obtain full-time unsubsidized employment at a sustainable wage. The program's goal for younger participants is to move them into employment, post-secondary education or vocational training, return to high school for a GED or diploma, apprenticeship or the military. Overall, since 1976, A-DA has placed more than 7,200 people in jobs.

The Projects With Industry (PWI) program, funded by the Department of Education, provides customized short-term employment training and other workforce development services to individuals with disabilities. A-DA partnered with five other disability organizations – ACCESS Independent Living Center, Mental Health Systems, ARC, San Diego State University Foundation, and Goodwill – as well as the area One-Stop employment centers for this grant.

San-Diego area One-Stop centers provide a full range of employment services from job banks to job training. They provide customized employment training for individuals with disabilities through vouchers, which entitle the job seeker to training from one of the partner organizations. A-DA, for example, provides computer training.

The program operates with assistance from a Business Advisory Council (BAC), made up of representatives from local businesses who work to support the workforce development and hiring of individuals with disabilities. The Business Advisory Council supports the efforts of A-DA and other participating agencies by identifying jobs and careers available in the community, the skills necessary to perform those jobs, and helping develop job training programs that meet those needs. BAC members also evaluate current training programs, help program participants develop workplace skills, and conduct community outreach to encourage other businesses to hire individuals with disabilities.

#### **“A Matter of Balance: Managing Concerns About Falls”** York and Cumberland Counties, Southern Maine

Maine's “A Matter of Balance” (MOB) program strives to reduce the fear of falling and increase activity and functioning for older adults by teaching practical strategies for coping with the risk of falling. The Southern Maine Area Agency on Aging (AAA), MaineHealth's Partnership for Healthy Aging, Maine Medical Center (MMC) Division of Geriatrics, and University of Southern Maine (USM) School of Social Work partnered to offer these classes. The program began in Southern Maine, but organizers have begun to take it statewide.

The “Matter of Balance” evidence-based prevention program in Maine is modeled on a program developed by the Roybal Center for Research in Applied Gerontology at Boston University. Staff members from Maine Medical Center, the community home health agency, were trained in the program. While the original program used professional leaders, the Maine program introduced the use of trained volunteer leaders in order to reduce the cost of the program and allow it to be more widely disseminated. The program takes a comprehensive approach to maximizing activity, engagement, and function, and reducing fall risks. The Matter of Balance program is designed to reduce the fear of falling, stop the fear of falling cycle, and improve activity levels among community-dwelling older adults. Classes are held at

community sites, the AAA, YMCA, senior centers, subsidized housing community, and assisted living communities. The two-hour long classes are held twice a week for four weeks.

MaineHealth's Partnership for Healthy Aging has trained volunteers for the program and participants have been satisfied. After the classes, participants reported that they felt more comfortable talking with others about their fears of falling and reported desire to exercise and increase activity levels.

The program has shown improvements in falls control and increases in exercise. According to the local AAA, the Matter of Balance program has also shown statistical significance in participants' improved pre- and post-test ability in fall efficacy, management of falls, along with positive socialization and less isolation.

**'Partners on the PATH (Personal Action Toward Health)': Disease Self Management, Grand Rapids, Michigan**

Through the "Partners on the PATH" program, the Western Michigan Area Agency on Aging (AAA) partners with private agencies and a managed care company to reach out to older adults with one or more chronic health conditions, by offering a series of classes on the self-management of chronic diseases, such as arthritis, diabetes, and heart disease. The Western Michigan AAA, Priority Health Care (a local managed care organization), and four Community Aging Services Providers (CASPs) are among the partners involved in the PATH program. The program is funded in part by a \$400,000 Administration on Aging (AoA) grant.

The program is based on the Chronic Disease Self-Management Program developed by Kate Lorig at Stanford University. The study evaluated the effectiveness of a chronic disease self-management program on changes in health behavior, health status, and health service utilization. Western Michigan AAA brought the model to the PATH partnership. The program targets seniors living in Kent County, and serves both African-American and Hispanic elders living in urban and rural areas.

Working with Priority Health Care allows the AAA to work through the acute health care side to educate doctors. Priority Health Care also refers members' to participate in chronic disease self management classes. The classes are led by individuals who have themselves dealt with a chronic disease and cover such topics as nutrition, exercise, and communicating with doctors. Classes focus on encouraging participants to develop their own plans to improve and manage their health, built around their own preferences and interests.

"Partners on the PATH" has a number of participating partner organizations. All the partners in this program bring their individual areas of experience and perspective to the program. The program is led by the Western Michigan AAA and Priority Health Care, a local managed care organization. In addition, there are five partner Community Aging Services Providers (CASPs): 1) Senior Neighbor senior centers; 2) the Gerontology Network of Western Michigan, which serves the mental health population; 3) the United Methodist Community Health organization; 4) the Latin American Services Program; and 5) the Grand Valley State University, Kirkhof School of Nursing.

All the CASP partners made efforts to recruit and refer eligible participants from their individual communities for the disease self-management classes available through this partnership. The local AAAs used public presentations, press coverage, radio ads, and newsletter articles to

advertise the program. They also conducted outreach to different populations through the CASPs. About twenty percent of the program participants are referred by Priority Health Care and the rest by CASPs.

After implementation of the program, case managers have seen improvements in self efficacy, behaviors, exercise, relaxation, and health utilization in terms of communication with doctors were evident. Improving self-efficacy, or an individual's sense of competence or ability to manage or perform specified tasks, is a strong part of the program. The CASPs and Priority Health Care coordinated well to get many patients and clients referred to the classes. Program staff noted that many program participants had successful action plans from the program. Class participants felt more motivated and showed improvements in their health.